

## STUDENT LOAN EXIT INTERVIEW FORM

Name (Please print clearly)	Social Security	Number				
Expected Permanent Address	Street		Apt.			
City/State	Zip Code	:	Permanen	t Telephone		
School Name			E-mail Ad			
I understand the following infor	rmation about my	student loan		ratess		
☐ I must repay my loans(s), including accrue						
☐ I must repay my loan(s) even if I don't con ☐ I must repay my loan(s) within 10 years, us have qualified for a deferment.	nplete my education, if I	am dissatisfied with	•		<del>-</del> -	• • • •
☐ I may prepay all or part of my loan(s) with ☐ My minimum monthly payment will deper	nd on the type of loan pro	gram and the total	amount owed, but g	enerally will no	t be less than \$50	) per month.
In most cases, repayment will begin as follo • Federal Subsidized Stafford Loan or dropping to less than half-tim	ns — Principal and interes	t payments begin f	ollowing a six-month	n grace period a	fter leaving scho	ol :
Federal Unsubsidized Stafford Lo (interest added onto principal), grace period after leaving school	oans — Interest accrues in which can be done at the	time of application	. Principal and intere			
<ul> <li>Federal Perkins Loan — Principa to less than half-time attendance</li> </ul>	al and interest payments be.	pegin following a ni	ne-month grace peri			
Health Professions Student Loan after leaving school or dropping	to less than half-time enr	ollment.			. 1 . 2	
Nursing Student Loan — Princip to less than half-time enrollment  The providing interest and formers.	t.					ping
The prevailing interest rate, fees and repay disclosure statement.	ment terms and condition	is are specified in t	ne ioan application/p	romissory note	and/or the loan	
☐ I must notify my lender (in the case of Peri	kins Loans, the school), if <ul> <li>Change my address</li> </ul>		· Change my telepho	ne number		
<ul> <li>Change my name</li> <li>Change my references</li> <li>Transfer to another school</li> </ul>	Change my address     Change employer		Change my Social S		r	en e
☐ I will be notified, in writing, if any of my k	oans are transferred to an	other holder. I mus	t direct all future cor	respondence to	that holder.	
<ul> <li>☐ If I qualify, I may apply for a deferment (a</li> <li>☐ If I do not qualify for a deferment and am</li> </ul>	unable to make payment	s on a loan, I may r	equest forbearance fr	rom my lender.	Forbearance is a	
special arrangement made for borrowers en If I fail to repay a loan, I may be considered						
<ul> <li>My default status may be reported</li> </ul>			gative effect on my cr	edit rating for s	seven years.	
<ul> <li>The entire unpaid amount of my</li> </ul>	y loan, including interest,	may become due a	nd payable immedia			
My federal and state income tax			withheld. • My wages may be g	varrich ad		
<ul> <li>I may lose deferment and repayr</li> <li>I may be ineligible to receive any</li> </ul>	-		<ul> <li>I may be ineligible</li> </ul>		e professional lic	ense in my field.
I may be assessed collection costs					7	·
<ul> <li>If I have contacted my school, lender and g Education's Student Loan Ombudsman's of</li> </ul>						
in resolving disputes. The DE Ombudsmar Office of the Ombudsman, Student Finance	n may be contacted at the	address below:				
,		, ,			1	
Expected Employer	Ade	iress	City/State/Zip	Telep	hone	
and the same and t			,· <b>-</b>	(	}	
Name of Nearest Relative Relation	nship Ado	dress	City/State/Zip	Telep	hone	
	•		• •	(	<b>y</b>	A Section 1997
Personal Reference Relation	nship Ado	dress	City/State/Zip	Telep	hone	
					)	<u></u>
		dress	City/State/Zip	Telep		

Student's Signature

**Exit Interview Date** 

DAN SUMMARY								
Lender/Servicer	Guarantor	Loan Amount	Interest Rate	Monthly Payment	Repayment Begins			
	-							
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Deferment Options

		Loans Disbursed Before 7/1/87				Loans Disbursed 7/1/87-7/1/93			Loans Disbursed After 7/1/93
Deferment Type	Limit	PLUS (Loans Distri- buted Prior to 8/15/83)	Federal Stafford and SLS Loans	Federal PLUS Loans	Federal Consolidation Loans	Federal Stafford and SLS Loans	Federal PLUS Loans	Federal Consolidation Loans	All Loans
Student Borrowers									
Full-Time Student, Graduate Fellowshi and Rehabilitation Training	p, None	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Half-Time Student	None	No	No	No	No.	Yes	Yes	Yes	Yes
Armed Forces, Public Health Service, VISTA, and Peace Corps	3 years	Yes	Yes	No	20	Yes	No	No	No
National Oceanic Atmospheric Administration	3 years	No	No	No	No	Yes	No	No	No
Tax-exempt Organization Volunteer	3 years	Yes	Yes	No	No	Yes	No	No	No
Temporary Disability	3 years	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Internship or Residency	2 years	Yes	Yes	No	No	Yes	No	.No	No
Economic Hardship	3 years	No	No	No	No	No	No	No	Yes
Unemployment	2 years	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Unemployment	3 years	No	No	No	No	No	No	No	Yes
Teacher Shortage	3 years	No	No	No	No	Yes	No	No	No
Working Mother	1 year	No	No	No	No	Yes	No	No	No
Parental Leave	6 months	No	Yes	No	No	Yes	No	No	No
Parent Borrowers									
Parent PLUS Borrower Based on Dependent's Status	N/A	Yes	N/A	Yes	N/A	N/A	Yes	N/A	No

Contact your lender or servicer if you have any questions, or call a MGA / Sallie Mae Customer Services representative: 888-272-5543.

School—Please return this form to: Michigan Guaranty Agency

PO Box 30047

Lansing, MI 48909-7547 FAX: 517-335-6703